



Karen C. Handel  
Secretary of State

STATE BOARD OF CEMETERIANS C/O  
SECURITIES AND BUSINESS REGULATION  
2 Martin Luther King, Jr. Drive, S.E.  
Ste 802, West Tower  
Atlanta, Georgia 30334  
(404) 656-3920  
<http://www.sos.state.ga.us/securities/>

Robert D. Terry  
Division Director

Application For Registration As A Preneed Salesperson  
Pursuant To The Georgia Cemetery and Funeral Services Act of 2000  
Application Fee (Payable to State Board of Cemeterians) \$100.00

Part I - Employer					
Name of Preneed Dealer or Cemetery		Registration Number			
Mailing Address (Number and Street)		City	State	Zip Code	
Office of Employment Address (Number and Street)		City	State	Zip Code	
Person to Contact Regarding This application		Phone Number			
Part II - Applicant					
Name (Last)		(First)		(Full Middle or Maiden Name - specify if none)	
				Social Security Number	
Address (Number and Street)		City	State	Zip Code	
Date of Birth		Telephone Number			
Part III - Background Information				YES	NO
1. Do you have any type of working relationship with any other cemetery, preneed dealer or insurance company?					
2. Have you ever engaged in any unethical or dishonest practices in the funeral or cemetery business?					
3. Have you ever been convicted of a felony?					
4. Have you ever been convicted of a misdemeanor of which fraud is an essential element?					
5. Have you ever been convicted of a misdemeanor which involves any aspect of the funeral or cemetery business?					
6. Have you been permanently or temporarily enjoined, suspended, or barred by any court of competent jurisdiction or by any state or other jurisdiction from engaging in or continuing any conduct or practice involving any aspect of the funeral or cemetery business?					
7. Have you ever been adjudicated, civilly or criminally, to have committed fraud or violated any law of any state involving fair					
Part IV - Applicant's Certification					
I certify that I have read, understand, and agree to abide by, comply with, and adhere to all of the provisions, conditions and covenants of the Georgia Cemetery and Funeral Services Act of 2000, and the Rules and Regulations promulgated thereunder. I hereby certify that I am at least 18 years of age; that I am not subject to any order of the Secretary of State that restricts my ability to be registered as a preneed sales agent. By signing this application, I give authorization to the Office of Secretary of State to conduct a criminal history background on myself.					
This _____ day of _____, 200_____					
(Signature of Applicant)					
My Commission expires: _____					
(Notary Public)					
Part V - Employer Certification					
I hereby certify that the applicant is authorized to offer, sell, and sign preneed contracts on behalf of the cemetery or preneed dealer listed in Part 1 of this application, that the applicant meets the qualifications for registration and that the applicant has been informed of the requirements and prohibitions of the Georgia Cemetery and Funeral Services Act of 2000 and the Rules and Regulations promulgated thereunder relating to preneed sales. I further certify that the applicant has been informed of the cemetery or preneed dealer's preneed contract, and the nature of the merchandise, services or burial rights sold by the cemetery or preneed dealer.					
Authorized Signature and Title					